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INDICATION FORM**

Application Number	10/586,085
Filing Date	July 13, 2006
First Named Inventor	BUENO
Title	PROTEASE INHIBITORS
Art Unit	1614
Examiner Name	
Attorney Doctose Number	BKR-105

I hereby revoke all previous powers of attorney given in the above-identified application.

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I am the

☒ Application: University

☐ Assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

~~DR. L. BUENO~~

Date _____48157100Name: _____

Dr. Ing. P.D., Dr. es Sc.

Telephone

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Thiogen Company

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NOTE: Signatures of all the inventors or assignees (in record of the online internet or their representative(s)) are required. Submit multiple items if more than one INVENTOR is required, see below.

☐ Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32, and 1.33. The information is required to decide or retain a benefit by the public, which is to be used by the USPTO to process an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. The collection is estimated to take 3 minutes to complete, including gathering, reviewing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the form and/or suggestions for reducing this burden should be sent to the Civil Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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